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Art Unit: 2183**

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**From : Winston Hsu, Registration No. 41,526**

**Serial No.: 10/064,597**

**Attorney Docket No.: FTCP0002USA**

**Subject: Response to the Office Action mailed on 02/23/2005**

**Total Pages: 10 pages (including cover page)**

**Winston Hsu 04/15/2005**

**FTCP0002USA0\_A2\_1**

PTO/SB/97 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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(1) Transmittal Form	1 PAGE
(2) Fee Transmittal	1 PAGE
(3) Response to the Office Actoin	6 PAGES

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PTO/SB/21 (09-04)

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/064,597	
	Filing Date	07/29/2002	
	First Named Inventor	Shan-Chyun Ku	
	Art Unit	2183	
	Examiner Name	TREAT, WILLIAM M	
Total Number of Pages In This Submission	8	Attorney Docket Number	FTCP0002USA

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="text"/> Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	North America Intellectual Property Corporation	
Signature	<i>Winston Hsu</i>	
Printed name	Winston Hsu	
Date	04/15/2005	Reg. No. 41,526

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PTO/SB/17 (12-04)

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Effective on 12/09/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete If Known</b> Application Number <b>10/064,597</b> Filing Date <b>07/29/2002</b> First Named Inventor <b>Shan-Chyun Ku</b> Examiner Name <b>TREAT, WILLIAM M</b> Art Unit <b>2183</b> Attorney Docket No. <b>FTCP0002USA</b>	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) <b>0.00</b>			

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <b>50-3105</b> Deposit Account Name: <b>North America Intellectual Property Corp.</b>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.	

<b>FEE CALCULATION</b>																																																													
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>																																																													
	<b>FILING FEES</b> <table border="1"> <tr> <th>Application Type</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> <tr> <td>Utility</td> <td>300</td> <td>150</td> </tr> <tr> <td>Design</td> <td>200</td> <td>100</td> </tr> <tr> <td>Plant</td> <td>200</td> <td>100</td> </tr> <tr> <td>Reissue</td> <td>300</td> <td>150</td> </tr> <tr> <td>Provisional</td> <td>200</td> <td>100</td> </tr> </table>		Application Type	Fee (\$)	Small Entity Fee (\$)	Utility	300	150	Design	200	100	Plant	200	100	Reissue	300	150	Provisional	200	100	<b>SEARCH FEES</b> <table border="1"> <tr> <th>Application Type</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> <tr> <td>Utility</td> <td>500</td> <td>250</td> </tr> <tr> <td>Design</td> <td>100</td> <td>50</td> </tr> <tr> <td>Plant</td> <td>300</td> <td>150</td> </tr> <tr> <td>Reissue</td> <td>500</td> <td>250</td> </tr> <tr> <td>Provisional</td> <td>0</td> <td>0</td> </tr> </table>		Application Type	Fee (\$)	Small Entity Fee (\$)	Utility	500	250	Design	100	50	Plant	300	150	Reissue	500	250	Provisional	0	0	<b>EXAMINATION FEES</b> <table border="1"> <tr> <th>Application Type</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> <tr> <td>Utility</td> <td>200</td> <td>100</td> </tr> <tr> <td>Design</td> <td>130</td> <td>65</td> </tr> <tr> <td>Plant</td> <td>160</td> <td>80</td> </tr> <tr> <td>Reissue</td> <td>600</td> <td>300</td> </tr> <tr> <td>Provisional</td> <td>0</td> <td>0</td> </tr> </table>		Application Type	Fee (\$)	Small Entity Fee (\$)	Utility	200	100	Design	130	65	Plant	160	80	Reissue	600	300	Provisional	0	0	<b>Fees Paid (\$)</b> _____
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Provisional	0	0																																																											
<b>2. EXCESS CLAIM FEES</b>																																																													
<b>Fee Description</b>							<b>Small Entity Fee (\$)</b>																																																						
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent							50																																																						
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent							200																																																						
Multiple dependent claims							360																																																						
<b>Total Claims</b>		<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>		<b>Fee (\$)</b>																																																						
- 20 or HP = _____ x _____ = _____		HP = highest number of total claims paid for, if greater than 20		<b>Fee Paid (\$)</b>		<b>Fee Paid (\$)</b>																																																							
<b>Indep. Claims</b>		<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Fee Paid (\$)</b>																																																								
- 3 or HP = _____ x _____ = _____		HP = highest number of independent claims paid for, if greater than 3		<b>Fee Paid (\$)</b>																																																									
<b>3. APPLICATION SIZE FEE</b>																																																													
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																																																													
<b>Total Sheets</b>		<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>																																																							
- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____		<b>Fee Paid (\$)</b>																																																											
<b>4. OTHER FEE(S)</b>																																																													
Non-English Specification, \$130 fee (no small entity discount)							<b>Fees Paid (\$)</b>																																																						
Other: _____							<b>Fees Paid (\$)</b>																																																						

<b>SUBMITTED BY</b>			
Signature <i>Winston Hsu</i>	Registration No. <b>41,526</b> (Attorney/Agent)	Telephone <b>302-729-1562</b>	
Name (Print/Type) <b>Winston Hsu</b>	Date <b>04/15/2005</b>		

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**METHOD FOR QUICKLY DETERMINING LENGTH OF AN EXECUTION  
PACKAGE**

Appl. No. : 10/064,597 Confirmation No. 5129  
Applicant : Shan-Chyun Ku  
Filed : July 29, 2002  
TC/A.U. : 2183  
Examiner : William M. Treat  
Docket No. : FTCP0002USA  
Customer No. : 27765

Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

**AMENDMENT**

5 Sir:

In response to the Office action of February 23, 2005, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

10 **Remarks/Arguments** begin on page 5 of this paper.